



**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                          |                          |
|--------------------------|--------------------------|
| Attorney Docket Number   | 46884.00018              |
| First Named Inventor     | Sylvia Tidwell Scheuring |
| <b>COMPLETE IF KNOWN</b> |                          |
| Application Number       | 10/066,126               |
| Filing Date              | January 30, 2002         |
| Group Art Unit           | 2161                     |
| Examiner Name            | Unknown                  |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

**SYSTEM AND METHOD FOR MATCHING CONSUMERS WITH PRODUCTS**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **January 30, 2002** as United States Application Number or PCT International

Application Number **10/066,126** and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|--|--------------------------|--------------------------|--------------------------|
|                                     |         |  |                          | YES                      | NO                       |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231

PTO/SB/01 (10-01)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

**DECLARATION — Utility or Design Patent Application**

|   |  |  |   |             |   |
|---|--|--|---|-------------|---|
| Direct all correspondence to.   |  | <input checked="" type="checkbox"/> Customer Number<br>or Bar Code Label | 30256   | OR          | <input type="checkbox"/> Correspondence address below |
| Name  |  |  |   |             |   |
| Address   |  |  |   |             |   |
| City  |  | State  |   | ZIP         |   |
| Country   |  | Telephone  |   | Fax         |   |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |  |  |   |             |   |
| NAME OF SOLE OR FIRST INVENTOR:   |  |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |   |
| Given Name<br>(first and middle [if any])   |  |  | Family Name<br>or Surname   |             |   |
| Sylvia Tidwell  |  |  | Scheuring   |             |   |
| Inventor's<br>Signature   |  |  | Date  |             |   |
|   |  |  | April 25, 2002  |             |   |
| Carmel  |  | CA   | USA   | USA         |   |
| Residence: City   |  | State  | Country   | Citizenship |   |
| 225 Crossroads Boulevard, PMB 404   |  |  |   |             |   |
| Mailing Address   |  |  |   |             |   |
| Carmel  |  | CA   | 93923   | USA         |   |
| City  |  | State  | Zip   | Country     |   |
| NAME OF SECOND INVENTOR:  |  |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |   |
| Given Name<br>(first and middle [if any])   |  |  | Family Name<br>or Surname   |             |   |
| Jerome James  |  |  | Scheuring   |             |   |
| Inventor's<br>Signature   |  |  | Date  |             |   |
|   |  |  | 25-Apr-02   |             |   |
| Carmel  |  | CA   | USA   | USA         |   |
| Residence: City   |  | State  | Country   | Citizenship |   |
| 225 Crossroads Boulevard, PMB 404   |  |  |   |             |   |
| Mailing Address   |  |  |   |             |   |
| Carmel  |  | CA   | 93923   | USA         |   |
| City  |  | State  | Zip   | Country     |   |
| <input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto   |  |  |   |             |   |

P10/35/02A (11-03)

Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

# DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 2 of 2

|   |          |   |     |
|---|----------|---|-----|
| Name of Additional Joint Inventor, if any:  |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))      |          | Family Name or Surname  |     |
| David A                                     |          | Schultz   |     |
| Inventor's Signature <i>David A Schultz</i> |          | Date <i>Apr 25, 2002</i>  |     |
| Residence: City                             | Richmond | State   | CA  |
| Country                                     | USA      | Citizenship   | USA |
| Mailing Address 607 Key Boulevard           |          |   |     |
| Mailing Address                             |          |   |     |
| City  | Richmond | State   | CA  |
| ZIP   | 94805    | Country   | USA |
| Name of Additional Joint Inventor, if any:  |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))      |          | Family Name or Surname  |     |
|   |          |   |     |
| Inventor's Signature                        |          | Date  |     |
| Residence: City                             |          | State   |     |
| Country                                     |          | Citizenship   |     |
| Mailing Address                             |          |   |     |
| Mailing Address                             |          |   |     |
| City  |          | State   |     |
| Zip   |          | Country   |     |
| Name of Additional Joint Inventor, if any:  |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))      |          | Family Name or Surname  |     |
|   |          |   |     |
| Inventor's Signature                        |          | Date  |     |
| Residence: City                             |          | State   |     |
| Country                                     |          | Citizenship   |     |
| Mailing Address                             |          |   |     |
| Mailing Address                             |          |   |     |
| City  |          | State   |     |
| Zip   |          | Country   |     |

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

1066436-06102

Please type a plus sign (+) inside this box → +

PTO/SB/81 (02-01)

Approved for use through 10/31/2002, OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

|                        |                          |
|------------------------|--------------------------|
| Application Number     | 10/066,126               |
| Filing Date            | January 30, 2002         |
| First Named Inventor   | Sylvia Tidwell Scheuring |
| Group Art Unit         | 2161                     |
| Examiner Name          | Unknown                  |
| Attorney Docket Number | 46884.00018              |

I hereby appoint:

☐ Practitioners at Customer Number  
OR

Place Customer  
Number Bar Code  
Label here

☒ Practitioner(s) named below:

| Name/ Registration Number  |
|--|
| Marc A. Sockol, Reg. No. 40,823; Daryl C. Josephson, Reg. No. 37,365; Cameron Kerrigan, Reg. No. 44,826; David B. Abel, Reg. No. 32,394; Nathan Lane, Reg. No. 43,738; Lorinda Howland, Reg. No. 42,671; Michael Lechter, Reg. No. 27,350; David Koo, Reg. No. 46,839; David Rogers, Reg. No. 38,287; William Bachand, Reg. No. 34,980; Aaron Wininger, Reg. No. 45,229; Paul A. Durdik, Reg. No. 37,819; Paul J. Meyer 47,791; Victoria L. Nicholson, Reg. No. 47,823; Vid Bhakar, Reg. No. 42,323; Fariba Sirjani, Reg. No. 47,947; and Alexander B. Ching, Reg. No. 41,669. |

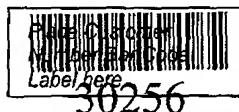
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number  
OR

☒ Practitioners at Customer Number  
OR

30256



30256

☐ Firm or  
Individual Name

PATENT TRADEMARK OFFICE

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

|           |                          |
|-----------|--------------------------|
| Name      | Sylvia Tidwell Scheuring |
| Signature |                          |
| Date      | April 25, 2002           |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

**SIGNATURE of Applicant or Assignee of Record**

|           |                        |
|-----------|------------------------|
| Name      | Jerome James Scheuring |
| Signature |                        |
| Date      | 25 Apr. 02             |

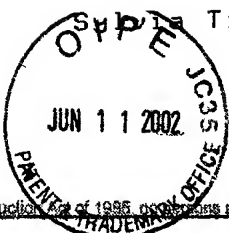
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

**Burden Hour Statement** This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



10066126-061102



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0551-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

|                        |                          |
|------------------------|--------------------------|
| Application Number     | 10/066,126               |
| Filing Date            | January 30, 2002         |
| First Named Inventor   | Sylvia Tidwell Scheuring |
| Group Art Unit         | 2161                     |
| Examiner Name          | Unknown                  |
| Attorney Docket Number | 46884.00018              |

I hereby appoint:

☐ Practitioners at Customer Number  
OR

Place Customer  
Number Bar Code  
Label here

☒ Practitioner(s) named below:

| Name/Registration Number   |
|--|
| Marc A. Sockol, Reg. No. 40,823; Daryl C. Josephson, Reg. No. 37,365; Cameron Kerrigan, Reg. No. 44,826; David B. Abel, Reg. No. 32,394; Nathan Lane, Reg. No. 43,738; Lorinda Howland, Reg. No. 42,671; Michael Lechter, Reg. No. 27,350; David Koo, Reg. No. 46,839; David Rogers, Reg. No. 38,287; William Bachand, Reg. No. 34,980; Aaron Winger, Reg. No. 45,229; Paul A. Durdik, Reg. No. 37,819; Paul J. Meyer 47,791; Victoria L. Nicholson, Reg. No. 47,823; Vid Bhakar, Reg. No. 42,323; Fariba Sirjani, Reg. No. 47,947; and Alexander B. Ching, Reg. No. 41,669. |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.  
OR

☒ Practitioners at Customer Number  
OR

30256



PATENT TRADEMARK OFFICE

☐ Firm or  
Individual Name

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

|           |                         |
|-----------|-------------------------|
| Name      | David A. Schultz        |
| Signature | <i>David A. Schultz</i> |
| Date      | 4/25/02                 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

**SIGNATURE of Applicant or Assignee of Record**

|           |  |
|-----------|--|
| Name      |  |
| Signature |  |
| Date      |  |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.